This information sheet has been written to provide you with information about sexuality and cancer. We hope it answers some of the questions you may have as well as assisting you to rebuild your sexual confidence. This information sheet is intended for people of all sexual orientations.

Sexuality means different things to different people. It’s about who you are, how you see yourself, and how you connect with others. It is much more than sexual intercourse.

Your sexuality is not fixed. You can change your mind, find different things pleasurable, communicate differently, build your sexual self-esteem and feel good about who you are and how you choose to share that with others.

How cancer and its treatment may affect your sexuality

Many people with cancer say they feel washed out and almost completely without energy over many months or even years. This may be to do with the cancer itself or, sometimes, the treatment.

There are four main ways that cancer or its treatment can affect your sexuality.

It can affect your:

- physical ability to give and receive sexual pleasure
- thoughts and body image (how you see yourself)
- feelings, such as fear, sadness, anger and joy
- roles and relationships.

In this situation you might not want to bother to do anything at all about sex. However, your desire to feel good about yourself or to reach out and connect with another person in your life rarely changes.

In many relationships one partner may be more interested in sex than the other. Cancer can exaggerate this mismatch. If one partner has a change in their level of desire, this may be upsetting when there is the added complication of cancer.

Cancer treatments and their effects

Surgery

Any form of surgery can affect our sex lives, even if it does not involve the sex organs directly. However, cancer treatment that affects the genitals and breasts directly causes quite marked changes for both men and women.

Radiation treatment

Radiation treatment uses high energy rays (radiation), which destroy the cancer cells, while doing as little harm as possible to normal cells.

Radiation treatment commonly causes:

- fatigue (tiredness that does not go away with rest) which may last for several weeks, months, or even years.
- skin irritation, redness and discomfort to the part of the body being treated.

For men with prostate cancer having low dose rate brachytherapy, it is suggested you wear a condom during sex for some weeks after treatment. Discuss this with your cancer doctor or nurse.

Chemotherapy

Chemotherapy is the use of anti-cancer (cytotoxic) drugs to destroy cancer cells. Some of the side effects of chemotherapy, such as sickness, weakness, depression, tiredness, and lack of energy can reduce...
the desire for sex. However, these side effects of treatment may be reduced or stopped with medication. With time, your sex drive will usually return.

**Hormonal therapy**

Hormonal therapies may reduce your sex drive. Some women may experience menopausal symptoms, such as hot flushes and vaginal dryness. Men may have hot flushes and difficulty getting or maintaining an erection or both.

Tamoxifen—although tamoxifen causes menopausal symptoms it does not act as a contraceptive. It is not recommended you become pregnant while taking it. Use effective non-hormonal contraceptives, such as a condom or a diaphragm.

**Infertility**

Infertility means that a man cannot father children and a woman cannot become pregnant. Chemotherapy and radiation treatment can cause infertility for some men and women. Talk to your doctor about how likely this is with your treatment. Your doctors may not be in a position to know for sure that you will be infertile, so for some people there is an uncertainty, which is ongoing and difficult to cope with.

**Contraception**

It’s not recommended you become pregnant while having treatment and for some time after treatment finishes. Discuss this issue with your cancer doctor or nurse.

**Solutions for pain during intercourse**

You may find it helpful to plan to make love after pain medication has been taken. Pillows and cushions can be used to help you feel more comfortable and supported. Side-by-side intercourse may reduce body weight on a sore area. Setting the scene, creating a sensual atmosphere, or just exploring – alone or with your partner – may be satisfying.

**Solutions for vaginal problems**

Vaginal changes may include dryness, narrowing, ulceration or infection. Lubricants, such as Replens or Sylk can help with dryness. Gently stretching the vagina regularly can help. Talk to your doctor, nurse or sexual counsellor for advice on ways to manage these problems.

**Solutions for loss of erection**

There are a number of things that men can try to assist with this problem, such as medications, pumps or injections. Talk to your doctor or cancer nurse about your options.

**Some common questions about sexuality and cancer**

**Can sexual activity actually cause cancer?**

The development of a few cancers may be influenced by a virus that is passed from one person to another during sex. These viruses include the human papilloma virus (HPV) and both hepatitis B and C. But very few people who have one of these viral infections get cancer as a result.

There are many factors other than the virus at work, such as:

- the genes we inherit from our parents
- whether or not we smoke
- our age
- our diet
- our general health.

However, some people still see sex as bad or sinful, and at some unconscious level fear that their cancer may be punishment for some past sexual disease or ‘sin’. If you feel worried or guilty about your cancer having been given to you as a punishment, then it can be helpful to talk this through with a minister, a counsellor, or by phoning 0800 CANCER (226 237).
Can I catch cancer from my partner?
If your partner has cancer, you cannot catch it from any sexual activity. You cannot catch cancer from sex.

Could sex make my cancer worse?
Sex and all the love and caring that goes with it can be helpful to those who have cancer. Many people feel depressed, unlovable, guilty, or afraid when they have cancer or are having treatment, and their partner’s affection and acceptance can make a big difference.

Are there times when sex should be avoided?
Yes there are. It is safest either to avoid sex, or to be sure to wear a condom, or use some other form of barrier contraception during and for a few days after chemotherapy. We do not know enough about whether chemotherapy drugs can be present in semen or vaginal fluids. Using barrier contraception removes any potential risks, and avoids the stinging sensation some partners report.

For women who can still have children it is best to avoid becoming pregnant during treatment with chemotherapy. Vaginal intercourse is probably best avoided very soon after pelvic surgery in women. The time to get back to sex will vary greatly according to the sort of operation you had, and how quickly you are healing. You will be the best judge as to when you are ready. Some types of cancer (for example the cervix or bladder) cause bleeding from the vagina or in the urine. If this sort of bleeding is made worse by intercourse then it is sensible to stop until treatment has controlled this.

Are there any good positions for making love after cancer?
This will depend a lot on which part of the body is affected by the disease. If it is the pelvic area then it will take some gentle and patient experimenting to discover which lovemaking positions now suit you both. This can also be true after a mastectomy when some people say that they don’t want their lover’s weight resting on them. Maybe making love side by side or swapping who is on top will be better. Most couples find that with loving communication they can sort out what suits them best. And this will change with time, so be prepared to change what you do.

How can I overcome problems of tiredness?
Be flexible about the time of day you make love. Experiment with less demanding positions for lovemaking, and agree with your partner that lovemaking need not always mean a long session. Make time to be together, book a babysitter, or put the answer machine on.

I’m embarrassed about my scars but still want to make love — any ideas?
It is a good idea to first talk things through with your partner. Most people find their lovers are much less concerned by their scars than they imagine, and once the subject has been discussed openly they can feel more relaxed about the changes in their bodies. Why not try making love in the semi-darkness to avoid being seen so clearly. Some women also say that they find having sex with their bra on after a mastectomy makes them feel sexier. This both accommodates the false breast (prosthesis), if there is one, and helps to conceal scars. Crop tops or an all-in-one with gusset poppers can increase your comfort without you having to be completely hidden. Men may also find it helpful to wear clothing such as vests and cummerbunds during sex if they are bothered by their scars.
Suggested websites

American Cancer Society www.cancer.org

Macmillan www.macmillan.org.uk

Cancer Council Victoria (Australia) www.cancervic.org.au

Cancer Society of New Zealand www.cancernz.org.nz

The suggested websites (other than our own) are not maintained by the Cancer Society of New Zealand. We only suggest sites we believe offer credible and responsible information, but we cannot guarantee that the information on such websites is correct, up-to-date, or evidence-based medical information. We suggest you discuss any information you find with your cancer care health professionals.

The Cancer Society has published a booklet Sexuality and Cancer/Hōkakatanga me te Mate Pukupuku: A guide for people with cancer and their partners. This booklet can be obtained via the web address or 0800 number at the end of this information sheet.

This information sheet was reviewed in August 2011 by the Cancer Society. The Cancer Society’s information sheets are reviewed every three years.

For cancer information and support phone the cancer information nurses on 0800 CANCER (226 237) or go to www.cancernz.org.nz